

**ISSUE SLIP STAPLE AREA (for additional cross references)**

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>100235</i>	<i>1-18-88</i>
O.I.P.E. CLASSIFIER		<i>162</i>	<i>2/1/88</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	<i>109916</i>	<i>2/10/88</i>

## INDEX OF CLAIMS

✓	..... Rejected	N	..... Non-elected
=	..... Allowed	I	..... Interference
— (Through numeral)	..... Canceled	A	..... Appeal
÷	..... Restricted	O	..... Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
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9	✓	✓	
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Claim		Date					
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BEST AVAILABLE COPY

**If more than 150 claims or 10 actions  
staple additional sheet here**

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